

SUMMARY OF THE MEETING OF
THE NATIONAL HIGH BLOOD PRESSURE COORDINATING COMMITTEE
April 3, 1980
Bethesda, Maryland

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Appendix A: Coordinating Committee Self-Assessment

Introduction

Dr. Levy opened the meeting by noting that:

- The stroke death rate has declined by five percent every year since the beginning of the Program.
- Confusion about hypertension-related mortality statistics will continue because of the change in classification by the National Center for Health Statistics, as discussed at the January meeting.
- Robert Moser is replacing David Richardson as representative of the American College of Physicians and Martha Hill is replacing Elizabeth Giblin as representative of the American Nurses' Association, Inc.

A semantic problem concerning the definition of hypertension was raised and discussed, namely that some define it as 160 over 95 and others, e.g., physicians in the United States, define it as 140 over 90. Other issues include the use and definition of the terms "border-line" and "mild" hypertension. A small group will be impaneled to study these issues, communicate with WHO and other groups, and report back to the Committee with recommendations at the fall meeting.

SCIENTIFIC ISSUES

1. Consideration of JNC II

Dr. Krishan described the process underlying the development of this consensus document, which is directed primarily at the practitioner, and pointed out some of the report's main features:

- It redefines hypertension in the context of recent research findings
- It emphasizes lower blood pressures as goals rather than stressing therapy alone
- It emphasizes long-term care and continuity of care
- It invokes the concept of stepped-care, but acknowledges alternatives
- It introduces the concept of non-drug therapy as a prudent concept for patients with hypertension
- It makes more decisive recommendations regarding the management of mild hypertension and the management of hypertension in the elderly, as well as special patient groups

Although members praised the document and accepted it "in concept," the discussion revealed some problems:

- The importance of HDFP results do not come through clearly enough
- There is no reference to the efforts of the Working Group on Critical Patient Behaviors, nor is there a sense of the active patient and the patient's responsibility in a partnership with the provider
- It needs stronger reference to the work of the NHBPEP and to the materials available through the Program
- Some words and phrases need change or clarification, e.g., "intolerable side effects"
- There is some confusion concerning systolic hypertension in the elderly, because of an at least apparent inconsistency between this report and the Program's Statement on Hypertension in the Elderly

Dr. Krishan reported on some minor changes made at a recent meeting of the JNC. The relationship of the JNC to the Coordinating Committee was clarified: the Coordinating Committee appointed the membership of the JNC, which is a working group of the Coordinating Committee.

The Committee approved the document in concept, and agreed to submit final revisions in accordance with the following timetable:

- All suggestions and corrections are to be submitted within one week
- A revised version is to be sent to all members within three weeks
- All comments are to be returned by May 15
- Final vote will be taken at the June meeting

2. Final Report on UBRA - Harris Survey

The Committee received copies of the final report of the UBRA-Harris Survey. Dr. Sondik commented on this "penultimate draft" (only minor changes are foreseen), highlighted the principal results of the survey, and asked for comments, suggestions, and criticism from the Committee members.

Discussion brought out some questions regarding assumptions that lay behind some of the survey questions and regarding the phrasing of

some of the questions. It was pointed out that the 1979 survey questions were intended to replicate as closely as possible those of the 1973 survey so that the 1979 survey could serve as a benchmark evaluation.


Committee members were asked to identify any issues they think warrant further analysis and to send in any comments on sections they find questionable.

3. Interdisciplinary Task Force on Provider Roles - Initial Discussion of Results

Although the report is expected before the June meeting, an overview was provided at this time so the Committee members would have some idea of its content. The Task Force looked at five broad problem areas:

- Lack of awareness among professionals of competencies of other professionals
- Turf protection
- Barriers arising from legal and liability constraints
- Lack of economic incentives for people to work together
- Barriers arising from the organization of health systems, including inadequate mechanisms for communication and time and physical constraints

To bring problems to light and raise issues for discussion, the Task Force made over 30 recommendations, including:

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- Interdisciplinary focus should be the central theme of the 1981 National Conference on HBP Control
 - Existing interdisciplinary programs should be reviewed to identify successes and problems
 - Accrediting bodies for continuing education programs should reciprocate credits
 - A consortium for all professional boards should be formed at the national and state levels to minimize conflicts among practice acts and licensing requirements

6. Month Update

The HBP Month program is on schedule, with 75,000 copies of the kit printed, mailings to over 130 national organizations accomplished, and plans for a formal and informal evaluation of Month materials. Planning for 1981 has already begun, and any suggestions concerning the focus of materials for 1981 will be appreciated. A more complete report will be presented at the June meeting, and HBP Month will be discussed at the two-day September meeting.

7. HBP Exhibit Schedule and Call for Volunteers

The fall exhibit schedule was distributed so that Committee members attending the meetings can, if they wish, spend some time at the exhibit helping to represent the Program.

8. Information Sharing


(Some members preferred to reserve their comments until the full-scale presentation at the September meeting.)

American College of Cardiology (E. Frohlich)

A reminder: The International Society of Hypertension is meeting in New Orleans next month.

JNC Member (W. McFate Smith)

NHLBI has awarded a grant for the study of isolated systolic hypertension among the elderly, involving five centers: Chicago, Pittsburgh, Birmingham, Portland, St. Louis. Purposes of the pilot study are to:

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- Determine the feasibility of recruiting and retaining the elderly population.
 - Gather data that will permit some decisions on choices in second-step drugs for a definitive study.

Screening should begin in early 1981.

American Nurses' Association, Inc. (S. Cunningham)

- Strategies are being planned to bring the Association's attention to the problem of awarding continuing education credits to nurses attending national meetings.
- About 120 nurses attended the Association-sponsored breakfast at the National Conference.

- Dr. Kochar's memorial statement on Linda Daniels, made at the National Conference, will be published in the American Journal of Nursing and in The American Nurse.
- The American Heart Association Cardiovascular Nursing Council will, for the first time, put hypertension on its program for its national meeting in November.
- The May issue of the American Journal of Medicine will have four articles on hypertension.

American Hospital Association (E. Lee)

- Month activities include sending kits to public relations people, patient representatives, social workers, etc.
- Data are being gathered to help assess what various groups are doing in the area of promoting patient education.

Committee on Hypertension in Minority Populations (E. Chow)

- NIH has funded an analysis program as part of the state hypertension program; in California a sample of the Asian community was added in the analysis, and a significant increased prevalence of hypertension was found.
- "Conferencing" continues to be used as a mechanism to educate the minority population in the theory of hypertension. The Native Americans are planning a second conference, to be held in Tulsa, Oklahoma, near the end of the year.

Citizens for the Treatment of High Blood Pressure (M. Gorman)

- Funding for hypertension project grants to the states was not cut by the Congress.
- The effort to put ceilings on all the Institutes' funding has been at least postponed.

NHLBI (G. Ward)

- CBS contacted the Institute concerning cardiovascular disease as a possible topic for its new science series "Universe."
- Articles of interest have recently appeared in Lancet on OTC cold remedies and anorectics and their effect on high blood pressure.

The meeting adjourned at 1:20 p.m.